

Request for Separate Taxation for Cooperative Housing Corporation



	FOR APPRAISAL DISTRICT USE ONLY	
YEAR	Legal Description:	
	Parcel Number:	
Appraisal District Name		
Address		Phone (area code and number)
This request covers property owned by the cooperative housing corporation on	January 1 of this year. You n	nust file this completed form between January
and March 1 of this year. Be sure to attach any documents requested. If the chi	ief appraiser grants the sepa	rate appraisal, you do not need to reapply
annually. However, you must provide the chief appraiser with an updated list of	stockholders, their interest a	nd residency upon request. Return this
completed form to the address above, with a payment of \$	for this separate appr	aisal.
STEP 1: Name, Address and Agent of Corporation		
Corporation Name		
Current Mailing Address (number and street)		
City, Town or Post Office, State, ZIP Code		Phone (area code and number)
Authorized Agent		
Current Mailing Address (number and street)		
Caroni maning reduces (names and cures)		
City, Town or Post Office, State, ZIP Code		
Cooperative housing corporation? Yes No		
STEP 2: Describe the Property		
Legal Description		
Street Address		
STEP 3: Documents		
File the following documents with this completed form: a. a list of names, addresses and proportionate interests of all stockholders	s in this property indicating e	ach stockholder that resides at this property.
b. a resolution from the corporation's board of directors certifying that the si		
c. a diagrammatic floor plan of the improvements on this property; and		
d. a survey plat map of the land showing location of the improvements.		
STEP 4: Sign and Date the Application		
sign here		
Signature		Date
Name	Title	
Corporation		

If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code, Section 37.10.